

APPLICATION FOR TRAINING CLASS 5640 Maelou Dr. Hamburg, NY 14075 716-649-4901

Handler	Phone	
Address	_City	Zip
Dog's Name	_Age	_Breed
Email	_Spayed/Neu	tered?
Session/Instructor?		Cost
Where have you attended training p	previously?	
Checks can be made payable to "T with your certificate of vaccination		Lot" and submitted along
All classes require the dog to earmond to the brought to class the and YUMMY! Tugs, a ball on a strare encouraged as well!	UNGRY! food ing, or othe	l rewards should be soft r favorite toy motivators
THE FOLLOWING MUST BE SIGNED BE I hereby state that I will abide by the rules, re Inc. and it's class instructors. I will hold blame persons connected therewith in any capacity who injury or damage to persons or property caused class or any other event held at The Barking Lo from liability includes owners, lessors and/or go where class or events are held. I have read and understand Signature	FORE SUBMITTING egulations and de less The Barking atsoever from lia by myself or a let of WNY, Inc.	cisions of The Barking Lot of WNY, Lot of WNY, Inc. and any and all bility, costs, and expenses for any ny dog brought by me to training I further agreee that this freedom